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Attorney Docket Number

DECLARATION	FOR UTILI	TY OR L								
	SIGN		First Named Inventor	STEWART E. SLO	STEWART E. SLOAN					
PATENT APPLICATION			COMPLETE IF KNOWN							
(37 CF	R 1.63)		Application Number							
Declaration	Declarat	tion	Filing Date							
Submitted OR With Initial		ed after Initial urcharge	Art Unit							
Filing	(37 ČFF required	R 1.16 (e))	Examiner Name							
I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
MASSAGE DEVICE										
(Title of the Invention)										
the specification of which										
is attached hereto										
OR										
was filed on (MM/DD/YYYY) as United States Application Number or PCT International										
Application Number		and was amended	d on (MM/DD/YYYY)		(if applicable).					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as										
amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application		Foreign Filing			Copy Attached?					
Number(s)	Country	(MM/DD/YY	YY) Not C	aimed Yes	No No					
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TTI Additional Contract to	: h	a Bata di assis si si								
Additional foreign applicat	ion numbers ar	e listea on a supple	ementai priority data sh	ieer PTO/SB/02B atta	cnea nereto.					

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])	Family Name or Surname SLO					AN				
Inventor's Signature	theut	Down							Date, 4/16/04	
Residence: City OMAHA	State			7				Citize	nship	
Mailing Address	NE			USA USA						
1337 SOUTH 101ST STREET, APT	T. 120									
City	State			ZIP				Country		
ОМАНА	NE			68124					USA	
NAME OF SECOND INVENTO	R:				A pe	tition ha	as bee	n filed f	or this unsigned inventor	
Given Name (first and middle [if any])						Family Name or Surname				
Inventor's Signature				-					Date	
Residence: City	State			Country		Citizenship				
Mailing Address			,							
City	State		ZIP		Country					
Additional inventors or a legal re	presentative are bei	ng named on the	es	upplemer	ntal shee	t(s) PTO/	SB/02A	or 02LR a	attached hereto.	